



Revised 01/2019

## STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY

File #: 0005930849

For Office Use Only

-FILED-

B0930-6086 1

|  |   |                           |                       |     | File #. 0005930649               |              |
|--|---|---------------------------|-----------------------|-----|----------------------------------|--------------|
| le.  |   | Title 30, Chapters 21 and | 25, Idaho Code        |     | Date Filed: 10/2/2024 1:47:00 PM | 0/02/202     |
|  | Base Filing fee: \$0.00 + \$20.00 for manual processing (form must be typed).                         |                           |                       |     |                                  |              |
| The  | The limited liability company named herein has been dissolved pursuant to 30-25-702(b)(2)(A).         |                           |                       |     |                                  |              |
|  |   |                           |                       |     |                                  |              |
| 1.   | <ol> <li>The name of the dissolved limited liability company is:</li> <li>PDW Trucking LLC</li> </ol> |                           |                       |     |                                  |              |
|  |   |                           |                       |     |                                  | PM :         |
| 2. The date the certificate of organization was originally filed: 1/30/2023  |   |                           |                       |     |                                  | Received     |
| 3.   | 3. Other information concerning the dissolution (optional):   |                           |                       |     |                                  | ived         |
|  |   |                           |                       |     |                                  | Åq           |
|  |   |                           |                       |     |                                  | Offic        |
|  |   |                           |                       |     |                                  | D            |
|  |   |                           |                       |     |                                  | о<br>Н       |
|  |   |                           |                       |     |                                  | 4pe          |
|  |   |                           |                       |     |                                  | Ηd           |
| <ol> <li>Name and address to return acknowledgement copy of this form to:</li> <li>Pauli Wheeler</li> <li>14892 N Highway 34, Thatcher, ID 83</li> </ol> |   |                           |                       |     | her, ID 83283                    | Idaho        |
| _  |   |                           |                       |     |                                  | Secretary    |
| 5.   | Signature   | e of a manager, member, o | or authorized person. | Sec | retary of State use only         | <del>4</del> |
| Pri  | Printed Name: Pauli Wheeler   |                           |                       |     |                                  |              |
| Sig  | Signature: Auli Whulur  |                           |                       |     |                                  | S<br>H<br>S  |
| Pri  | Printed Name:   |                           |                       |     |                                  |              |
| Sig  | Signature:  |                           |                       |     |                                  |              |